2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042793

Entity Name: NIYAMAT CORPORATION

FILED May 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

25030 US HWY 19, NORTH 25016 US HWY 19, NORTH CLEARWATER, FL 33763 CLEARWATER, FL 33763

Current Mailing Address: New Mailing Address:

25030 US HWY 19, NORTH 25016 US HWY 19, NORTH CLEARWATER, FL 33763 CLEARWATER, FL 33763

FEI Number: 52-2324572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARISHTA, ABDUL A FARISHTA, ABDUL A 25030 US HWY 19, NORTH 25016 US HWY 19, NORTH CLEARWATER, FL 33763 US CLEARWATER, FL 33763 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ABDUL A FARISHTA 05/30/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FARISHTA, ABDUL A FARISHTA, ABDUL A Name: Name: 25030 US HWY 19 NORTH 25016 US HWY 19 NORTH Address: Address:

City-St-Zip: CLEARWATER, FL 33763 US City-St-Zip: CLEARWATER, FL 33763 US

Title: Title: (X) Change () Addition () Delete FARISHTA, DILSHAD FARISHTA, DILSHAD Name: Name: 25030 US HWY 19 NORTH Address: 25016 US HWY 19 NORTH Address: CLEARWATER, FL 33763 US CLEARWATER, FL 33763 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABDUL A FARISHTA **PRES** 05/30/2009